

Political Committee Registration

C1PC | 100662862

	(360) 753-1111 Toll Free 1-877-601-2828	1.09.			(1/12)	10-	19-2015	
Committee Name (Include sponsor in committee name. See next page for definition of "sponsor." Show entire official name. Do not use abbreviations or acronyms in this box.) FAIR AND EQUAL WHATCOM					Acronym:			
111111111111111111111111111111111111111	Telephone: 360-676-8530							
Mailing Address								
8555 JUNIPER	R PLACE		Fax:					
City		ip + 4						
MAPLE FALLS		WHAT	COM 9	8266	E-mail: FAIRW	HATCOM@GMAI	L.COM	
☑ NEW. Complete☐ AMENDS previo	NOR AMENDED REGISTRATION? NEW. Complete entire form. AMENDS previous report. Complete entire form. COMMITTEE STATUS Continuing (On-going; not established in anticipation of any particular campaign election.) 2015 (Year) Classification of any particular campaign election.) (Year)							
What is the purpose or description of the committee? Bona Fide Political Party Committee - official state or county central committee or legislative district committee. If you are not supporting the entire party ticket, attach a list of the names of the candidates you support.								
☐ Ballot Committee - Initiative, Bond, Levy, Recall, etc. Name or description of ballot measure:						Ballot Number	FOR AGAINST	
Other Political Committee - PAC, caucus committee, political club, etc. If committee is related or affiliated with a business, association, union or similar entity, specify name:								
For single election-year only committees (not continuing committees): Is the committee supporting or opposing (a) one or more candidates? No If yes, attach a list of each candidate's name, office sought and political party affiliation.								
(b) the entire ticket of	<u> </u>		If yes, identify the party:					
2. Related or affiliated	d committees. List name, addre	ss and relatio	nsnip.			☐ Continue	d on attached sheet	
3. How much do you plan to spend during this entire election campaign, including the primary and general elections? Based on that estimate, choose one of the reporting options below. (If your committee status is continuing, estimate spending on a calendar year basis.) If no box is checked you are obligated to use Full Reporting. See instruction manuals for information about reports required and changing reporting options.								
MINI REPO	•	er un neporti	ng. See matruction manu			and changing repo	rung options.	
Mini Repor	rting is selected. No more than in the aggregate will be accept			i dii i topoit	ORTING ing is selected. The oy law will be filed as		npaign reports	
4. Campaign Manager's or Media Contact's Name and Address TIM DOUGLAS 2114 WILLIAMS ST, BELLINGHAM WA 98:			225		I	Telephone Number: 360-676-8530		
5. Treasurer's Name and Address. Does treasurer perform only mext page for details. List deputy treasurers on attached sheet. NATALIE MCCLENDON						Daytime Telephone Number: 360-319-8287		
4682 WYNN ROAD, BELLINGHAM WA 98226 6. Persons who perform only ministerial functions on behalf of this committee and on behalf of candidates or other political committees. List name, title, and address of these persons. See WAC 390-05-243 and next page for details. NATALIE MCCLENDON, TREASURER, 4682 WYNN ROAD, BELLINGHAM WA 98226								
7. Committee Officers	and other persons who author	ze expenditur	es or make decisions for co	ommittee. List name, tit	le, and address. See	~		
ALISON WALKER, VICE CHAIR, 2861 LAZER LN, BELLINGHAM WA 98226 IRIS MAUTE-GIBSON, CMTE MEMBER, 2110 YOUNG ST APT ST, BELLINGHAM WA 98225 MAX BRONSEMA, CMTE MEMBER, 120 CAMBRIDGE DR, LYNDEN WA 98264								
8. Campaign Bank or	Depository		E	Branch		City		
	CATIONAL CREDIT U			IRCHWOOD		BELLINGHAM		
holidays. In the spa	nust be open to the public by ap ace below, provide contact info n out-of-area address.							
Street Address, Room Number, City where campaign books will be available for inspection								
	ROAD, BELLINGHAM n appointment, contact the cam	paign at (telen	hone, fax. e-mail): (360)319-8287 N	ATALIEBHAM@	GMAIL.COM		
10. Eligibility to Give must receive \$1 contributing to a	e to Political Committees and 0 or more each from ten Wa Washington State political com	State Office shington Sta nittee. Addition	Candidates: A committee te registered voters befor onally, during the six month	e 11. Signature and e and correct to the b	Certification. I cert	ify that this statemen	t is true, complete	
prior to making	a contribution to a state officitions of \$10 or more each from	e candidate	your committee must have	e Committee	Freasurer's Signatu CCLENDON		Date 10-19-2015	
Absence of a che	icates your awareness of and eck mark means your committe mmittees and/or state office car	ee does not q						

Attachment to C1PC – Political Committee Registration

Name Fair and Equal Whatcom

	OAL WIAICON							
2. Related or affiliated committees								
5. Deputy Treasurers Name and Address.								
6. Persons who perform only ministerial functions, Name, Title and Address.								
7. Committee Officers, List Na	me, Title and Address.							
	CMTE MEMBER	8555 JUNIPER PL, MAPLE FALLS WA 98266						
SHASTA CANO-MARTIN		·						
DAVE FINET	CMTE MEMBER	3289 BRECKENRIDGE RD, EVERSON WA 98247						
TOM STUEN	CMTE MEMBER							
JUDITH AKINS	CMTE MEMBER							
MIKE ESTES	CMTE MEMBER							